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SUBJECT: TONIA MONTOFFE OF MIATO, COUP(Name of Corporation)

DOCUMENT NUMBER: POS 0000 23 330

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

OND SACANDO (Name of Firm/Company)

26 00 DOUGIAN BOAD SUIT TOO

(Address)

For further information concerning this matter, please call:

(Name of Person)

(Name of Person)

at (Alea Code & Daytime Telephone Number)

Street Address:

TO:

Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, GiNO G. SABAND	nereby resign as 「Nesti	dont (Title)
of HOUNA MONTEAG (Nan (Document Number, if known)	ne of Corporation) , a corporation organized under the laws of	f the State of
Florida	(Signature of resigning officet/director)	OB MAR 24 AH IDI WB

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314